FOR INSTRUCTIONS, SEE BACK OF FORM			FORM		
DISCLOSURE SUMMARY PAGE	A ETHIC	°C 41	DR-2 (Rev. 01/98)	DISCLOSURE REPORT	
	THE GIO	A ANG Luggi	Eor Office Use O	nly or 1 or 1	
COMMITTEE NAME (Must be same as on Statement of Organization of Committee Co	on) 2010 JAN 28	AM 8:	Comm. #	7176	
IMPORTANT: Indicate type of committee you are reporting for:			Audited		
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) Co (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central (8) Support State of Candidates	ounty/Local Candidate Committee		Computer		
Disse John	712-585-33		/-	111 12	
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE	67	DATE SIGNED		
Routine Penalties Due For Late File	d Reports Range	from	20 to \$800		
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOL	LOWING SENTENC	<b>E:</b> .			
I AM FILING A Junuary 19, 2010 REP (report date)	ORT FOR AN/A (1) EL	ECTION	N/(2)NON-ELEC	TION YEAR.	
CHECK IF AMENDMENT TO REPORT DATED		Local C	committees, enter D	Pate of Election	
Check if this is final (termination) report and attach Notice of Diss (You must continue to file reports until a Notice of Dissolution)	olution Form DR-3.		& Local Committee Election is held	es, enter County in	
CASH ON HAND at the beginning of the reporting period. (This is the of all monies held by the committee. This amount MUST be same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	ne total e the eriod,		• L. L. L.	258	
ADD TOTAL MONEY TAKEN IN THIS PERIOD	·	***********	* <u> </u>	7 2 7 3 0	
Schedule A: Cash Contributions total (Attach Schedule A)			6	58.76	
Schedule F: Loans Received total (Attach Schedule F)					
Schedule H: Total Sales of Campaign Property (Attach Sch					
(Schedule H.applies to Candidates' Committee		••••••	<del>-</del>		
		TAL	s	1121,34	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				11/2/10/7	
Schedule B: Expenditures total (Attach Schedule B)				218,21	
Schedule F: Loan Repayments total (Attach Schedule F)					
CASH ON HAND at the end of this reporting period (if final report, be zero) (Attach DR-3)	alance must			_	
UNPAID BILLS (From Schedule D - Attach Schedule D)			\$		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)		······································	\$		
$\label{eq:outstanding loans} \mbox{OUTSTANDING LOANS} \mbox{ (From Schedule F - Attach Schedule F)} \dots \\$		•••••	\$		
CANDIDATE COMMITTEES ONLY:					
CONSULTANT BREAKDOWN (Schedule G Attached?)			YE	s NO	
VALUE OF CAMPAIGN PROPERTY /From Schodule H. Attach Sci	hadula LIV		•		

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE CHECK THIS BOX IF PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA AMENDING FORM ETHICS & CAMPAIGN DISCLOSURE BOARD. COMMITTEE NAME (Must be same as on Statement of Organization) County Democrat Committee CANDIDATE NAME AND ADDRESS TO WHOM PURPOSE AMOUNT DATE ID NUMBER EXPENDITURE (DESCRIBE TRANSACTION) EXPENDED EXPENDED (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# 17 y Vee Expenses for reform for Fair 5 820 Wastown Parker 8-20-01 CK# \$ 183.21 West Des Moines 1 A 50266 2904 Rent for Booth ID# Taylor Co. Fair Bedford, 1A 50833 CK# 35,00 ID# CK# ID# CK# ID# CK# ID# CK# ID# CK# ID# CK# SUB-TOTAL 218.21 TOTAL (if last page of this schedule) 8,21 THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on a Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 56.6(3)(1).)

"TO I NOU I NOTO, SEE ONCH OF FUHM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE

В

(Rev. 09/97)

MONETARY

EXPENDITURES

COMMITTEE NAME (Must be same as on Statement of Organization)			(	CHECK THIS BOX IF		
Ta	4 lov County	Democrat Committee				
STATE CANDIDA	TES NOTE: IF A CONTRI	BUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION C THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABI	OMMITTEE), LIST THE LE FROM THE IOWA ET	PAC IDENTIFICATI THICS AND CAMPA	ON IGN	
CAUTION: Section any commen	ction 688.32A(6), lows (cial purpose by any per	code, prohibits the use of information copied from reports a son other than statutory political committees.	and statements for s	oliciting contribu	tions or	
DATE RECEIVED (MM/DO/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	- AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME	
7/21/09	ID# CK#	Receipts from . Ice Creim Gales		\$ 74.75		
8/06/09	ID# CK#	Veceream Sales at		57421		
8/25/09	ID#	en itemized contribution		10,00		
	ID# CK#	•				
	ID# CK#					
	ID#	•			·	
	ID# CK#					
	ID#					
	ID# CK#					
	ID#	·	·			
			SUB-TOTAL	· [ 561 7160		

\* Disclosure 'aw requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TUT WHEITUGUONS, See Back of Form

+ CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)

Page \_\_\_\_\_of \_\_\_\_\_

\$ 658,74

TOTAL (if last page of this

schedule)

SCHEDULE

A

(Rev. 06/97)

MONETARY

RECEIPTS